

FORT KNOX FOREIGN NATIONAL VISITOR (FNV) REPORT

For use of this form, see Fort Knox OPLAN 2-05

INDIVIDUAL _____ OF _____

DURATION
OF STAY:

FROM DATE/TIME:

TO DATE/TIME:

CIRCLE
ENTRY POINT

C/P #1
(WILSON ROAD)
(WILSON GATE)

C/P #2
(BULLION BLVD)
(CHAFFEE GATE)

C/P #4
(BRANDENBURG STA ROAD)
(BRANDENBURG GATE)

FOREIGN NATIONAL VISITOR INFO

NAME (Last, First, MI):

NATIONALITY:

SEX: M F DATE OF BIRTH:

PLACE OF ORIGIN:

HT: WT: EYE COLOR:

PASSPORT OR ID COUNTRY:

PASSPORT OR ID NUMBER:

PASSPORT EXPIRATION DATE:

VISA EXPIRATION:

VISA OR OTHER ID NUMBER:

CURRENT ADDRESS:

PURPOSE OF VISIT

PURPOSE OF VISIT/DESTINATION:

PERSON BEING VISITED / SPONSOR / CONTRACTOR OR FOREMAN

NAME (Last, First, MI, RANK OF SPONSOR):

ADDRESS:

PHONE #:

STATUS: ACTIVE DUTY FAMILY MEMBER RETIREE CONTRACTOR OTHER:

UNIT OF ASSIGNMENT OR CONTRACTOR NAME:

UNIT PHONE NUMBER:

VEHICLE DATA

VEHICLE TYPE: POV GOV RENTAL OTHER:

DRIVER: FNV SPONSOR OTHER:

MAKE:

YEAR:

MODEL:

LICENSE PLATE #:

COLOR:

VALID REGISTRATION: YES NO

STATE:

FOR OFFICIAL USE ONLY

PMO REP:

IOC WATCH OFFICER:

G-2/ATO:

JOURNAL ENTRY:

APPROVED / DISAPPROVED TIME:

ENTRY: APPROVED / DISAPPROVED TIME: _____

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: 5 USC 301 and 10 USC 3013.

PURPOSE: Information is needed for recording personnel accessing Fort Knox.

ROUTINE USE: Information is used for law enforcement and force protection issues.

DISCLOSURE: Mandatory. Failure to provide requested information can result in denial of access to Fort Knox.